

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: MEANS FOR HOLDING TWO PIECES IN POSITION RELATIVE TO EACH OTHER
Attorney Docket Number:: 0513-1007
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 6
Small Entity?:: No
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: DANIEL
Middle Name::
Family Name:: DEMIT
City of Residence:: COURBEVOIE
State or Province of Residence::
Country of Residence:: FRANCE
Street of Mailing 54 AVENUE GALLIENI
Address::
City of Mailing Address:: COURBEVOIE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 92400

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: PATRICK
Middle Name::
Family Name:: GUILLOMET
City of Residence:: MEUDON
State or Province of Residence::
Country of Residence:: FRANCE
Street of Mailing 8 SENTIER DES HAIES
Address::
City of Mailing Address:: MEUDON
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 92190

Correspondence Information

Correspondence Customer Number:: 000466

Representative Information

Representative Customer Number::	000466
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR00/02765	10/5/00

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	99/12620	10/11/99	Yes

Assignment Information

Assignee Name:: ABB BODY IN WHITE

Street of Mailing Address:: 14 RUE DENIS PAPIN

City of Mailing Address:: BEAUCHAMP

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 95250